



MARIHUANA FACILITIES APPLICATION PHASE I

City of Big Rapids
226 N. Michigan Ave, Big Rapids, MI 49307
(231)592-4020 www.cityofbr.org

APPLICANT INFORMATION		
Applicant Name:	Doing Business As:	
Entity Mailing Address:	City:	State and Zip:
Entity Physical Address:	City:	State and Zip:
Telephone Number:	Email Address:	

FACILITY TYPE (Note: One application per facility type and location.)
<input type="checkbox"/> Provisioning Center (MMFLA) <input type="checkbox"/> Retailer (MRTMA) <input type="checkbox"/> Microbusiness <input type="checkbox"/> Safety Compliance Facility <input type="checkbox"/> Grower: <input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class C <input type="checkbox"/> Excess Grower <input type="checkbox"/> Processor <input type="checkbox"/> Secure Transporter

FACILITY SITE INFORMATION		
Property Address:	Zoning District:	Parcel Number:
Property Status: <input type="checkbox"/> Owned <input type="checkbox"/> Leasing <input type="checkbox"/> Option <input type="checkbox"/> Land Contract		
Property Owner Name: (if different than Applicant)		Affiliation with Applicant:
Owner Mailing Address:	City:	State and Zip:
Owner Telephone Number:	Owner Email Address:	

PERSON COMPLETING THE APPLICATION (if different than the Applicant)		
Name:	Affiliation with Applicant:	
Mailing Address:	City:	State and Zip:
Telephone Number:	Email Address:	

APPLICATION ATTACHMENTS

The following is a checklist of items that must be submitted with the Phase I Marihuana Facilities Application. See the Application Instructions for item details. Incomplete Applications will not be processed.

- A copy of the Applicant's State application for Pre-Qualification. Please do not provide tax returns and bank statements.
- A copy of the Applicant's Notice of Pre-Qualification Status from LARA.
- A copy of the deed, lease, or option on the property. Also, written, notarized consent of the Property Owner authorizing the lessee to use the property for a marihuana facility, if property is leased.
- Scaled diagram of the proposed licensed facility and premises.
- Staffing Plan.
- City of Big Rapids Income Tax Withholding Employer Registration Form.
- Explanation of Economic Benefits to the City.
- Nonrefundable Application Fee of \$5,000.

CERTIFICATION

I, the undersigned, have the authority to sign this Application on behalf of the above-named entity. I have read all of the above answers and attached materials and they are true and correct. The entity certifies the following:

Neither the Applicant nor any true party of interest is in default to the City for any property tax, special assessment, utility charge, fines, fees, or other financial obligation owed to the City,

The Applicant has reviewed and agrees to conform its hiring and public accommodation practices to the state and federal anti-discrimination laws,

Neither the Applicant nor any true party of interest is ineligible from holding a license for any of the reasons set forth in the MMFLA, MCL 333.27402, and

The Applicant consents to inspections, examinations, searches and seizures required or undertaken pursuant to enforcement of this Ordinance.

Signature: _____ Date: _____

Printed Name: _____